

Grant County Planning Department Code Enforcement

P O Box 37 – 264 West Division Avenue
Ephrata WA 98823
(509) 754-2011 Ext. 2501

Office Use Only
Date Received

Received By: _____
Case # _____

Receipt Letter Sent
_____/_____/_____
_____/_____/_____
_____/_____/_____

CODE ENFORCEMENT COMPLAINT FORM

Please complete this form and return it to the above address. Provide as many relevant details as possible including specific address. **A SIGNED COMPLAINT FORM IS NECESSARY BEFORE CODE ENFORCEMENT CAN INVESTIGATE.**

Section 1. COMPLAINT LOCATION INFORMATION

ADDRESS OF POSSIBLE CODE VIOLATION:

If you do not know the specific address be as descriptive as possible about its location. For example: the south west corner of X & Y street..or...2 houses east of my address...or..3rd lot in from the corner of X & Y on the north side of the street, etc.

IF KNOWN:

PARCEL NUMBER _____ PROPERTY OWNER _____

NAME OF RESIDENT _____ PHONE NUMBER _____

Section 2. COMPLAINT SUMMARY

How long has the condition existed? _____

Please use the back of the form for details, any explanations or additional complaints

Section 3. COMPLAINANT INFORMATION

Print your name _____

Your Address _____

Zip Code _____ Home Phone _____ Work Phone _____

Confidentiality preference: Disclosure of information revealing your identity will depend on application of the public disclosure law, chapter 42.56 RCW, other applicable statutes and whether the complaint is criminally prosecuted. Please initial in the space that indicates whether you desire information revealing your identity be disclosed. Failure to initial will result in information being subject to disclosure. **By initialing Do Not Disclose I am indicating that the disclosure of my name would endanger my life, physical safety or property.**

_____ Do Not Disclose
Initial

_____ You May Disclose
Initial

SIGNATURE _____ DATE _____

CONTINUE ON OTHER SIDE



Section 4. ADDITIONAL COMPLAINANT INFORMATION

The violation must be visible from the public right of way. Or you must indicate that you would like us to contact you for permission to view the site from your property.

I give you permission to view the site from my property _____ Yes _____ No

Contact: _____ Contact Phone: _____

Section 5. COMPLAINT SUMMARY/ADDITIONAL INFORMATION